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O.R.#

Name of Professor

UNIVERSITY REGISTRAR

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Date Signature

Department/Division: ISRDS

Posted in: Stud. Perm Rec

Grade Sheet

REPORT OF GRADE COMPLETION

Date Amount ₹ 25.00	Form 19 Computer	
Date Issued :	11 20 29 Valid Until: 1st Sem. SY: 2023-2024 Issued by	- A
Incomplete Grades Obtained :		
Course No. and Descriptive Title:	Scib 11 - Gender and Society	Unit: 3
Name of Professor :	Lilian B. Nunez Department/Divi	sion: ISRDS

CME College (where subjects belong)

Family Name First Name Middle Name 19-1-00386 VILLEJO IVILLE RODAS					
19-1-00386 VILLEJO IVILLE RUDAS		Scio 11	3.0	Passes	
Submitted by: Approved: Approved: LIUAN B. nunez LIUAN B. nunez	12)	Received by:			
Instructor/Professor's Department Head	Signature Over Printed Name Date: Nov 20,2023 Department Head Registrar's Over Printed Name Signature Over Printed Name Date:				